

**End-of-Year Report for the Counseling Grant for Victims, First Responders, and Their Families Impacted by the Terrorist Attacks of September 11, 2001**

**A. Write a narrative summation of the activities and efforts supported by this grant, including a description of coordination efforts, intra-agency and inter-agency protocols, and new programs established.**

On May 13, 2002 the Massachusetts Office for Victim Assistance entered into contracts with 13 agencies (see attachment C3) to provide counseling services to individuals and families who lost someone on September 11, 2001 as a result of the terrorist attacks. Also included in service provision are the first responders to the crisis.

Section II of this report indicates services provided between May 13, 2002 and March 31, 2003. The information for the final period of the fiscal year, from April 1-June 30, 2003 will be available in early August. It is important to note that the number of "persons served" documented in the total column for Section II, A1, A2, and A4 represent only new clients seen throughout the time period. "Sessions funded" and "amount expended" reflect data for both new clients and ongoing clients. Additionally, the "total amount expended", Section II, B7, does not include funds used for start-up and outreach purposes when no clients were seen.

Since the mid-year report, ATSG providers have continued to provide various services to 9/11 family members and first responders. These services have included crisis intervention, crisis counseling (home-based, office-based, and/or community-based individual, family, and parent-child counseling), and peer support groups.

ATSG providers have worked diligently to develop a collaborative approach to serving this population. Through regularly scheduled meetings, they share information about services being provided, how the most pressing needs are being addressed, and where to locate and access the most useful resources. This information can then be brought back and shared with clients, so that any client receiving services can benefit from other opportunities offered by other agencies. For example, families have learned of various specialized groups that were created to meet a specific population such as widows and widowers who are beyond the childrearing stage of life and women who lost a father on September 11<sup>th</sup>. Other helpful resources have included opportunities for financial assistance for higher education and free summer camps for children affected by 9/11.

The following is a list of efforts made and activities planned by programs to provide services to those victim family members and first responders impacted by September 11<sup>th</sup>. (Following that is a list of efforts made by MOVA to provide support and technical assistance to agencies in their efforts to provide services):

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Program efforts

- ❖ Outreach to new 9/11 clients through personal telephone calls, mailings of letters and brochures, emails, and home visits.
- ❖ Outreach to 9/11 providers in other New England states including those in New Hampshire and Rhode Island.
- ❖ Participation in ATSG Provider meetings every 6 weeks.
- ❖ Collaboration with the Mass911 Fund, and attendance at the Fund's monthly Board meetings.
- ❖ Participation in collaborative efforts with the On-Site Academy, which serves emergency service workers in distress. Their program is for all law enforcement, fire service, or EMS personnel who are temporarily overwhelmed by the stress of their jobs, what they have seen, and what they have experienced. In December 2002, ATSG providers participated with On-Site Academy representatives to develop strategies about working with first responders that were impacted by 9/11.
- ❖ Informal activities aimed at stress reduction for families and first responders.
- ❖ Outreach to local police and fire departments.

MOVA efforts

- ❖ Continued to provide assistance to ATSG and FEMA providers through the coordination of email listservs.
- ❖ Facilitated an initial meeting between ATSG funded providers and leaders in the first responder community to foster collaboration. As a result of this meeting, the On-Site Academy provided leadership to ATSG clinicians regarding best practices for working with first responders.
- ❖ Collaborated with ATSG funded programs to update an information packet for 9/11 families on all ATSG and FEMA funded services; MOVA posted this information on its office web site at [www.mass.gov/mova](http://www.mass.gov/mova).
- ❖ Continued to collaborate with stakeholders also working with 9/11 families and first responders, such as the Mass911 Fund, the American Red Cross, the Department of Mental Health, and Senator Kennedy's Office.

**B. Write an assessment of ongoing counseling needs of victims, describing plans for addressing longer term needs after these federal funds have been exhausted.**

There continues to be an ongoing need for counseling and support services for 9/11 families and first responders. In November 2002, as MOVA began conducting site visits with agencies, ATSG providers began reporting an increase in referrals. Many bereavement counselors working with these families pointed out that it is often the second year after a tragic loss is experienced that is more difficult for the surviving family members. Counselors reported that those grieving need to live through the first year of holidays and special events, in

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order to fully realize and integrate their loss. Other ATSG providers noted that surviving family members are often immediately faced with the tasks of arranging funeral or memorial services, settling estates, sorting through belongings, and other tasks during the first year after the loss of their loved one. Therefore, it is not until these tasks are completed that the full weight of their grief is felt. Referrals increased for families ready to address their loss, those who needed assistance in stabilizing their lives, first responders who resisted support services initially, and those who were located in more isolated areas such as New Hampshire and Rhode Island.

Many groups have been developed to meet specific needs of this population. Groups for children and teens were identified as a specific area of need in order to aid youth in working through their grief, expressing their grief, and learning how to best handle reactions to loss. In the same way, there has been an increasing need for support groups for parents around how to cope with the grief reactions of their children and teens as well as behavioral issues that have arisen since the death of a parent. Groups for widows and widowers fifty years of age or older were instituted because feedback indicated that this group felt out of place joining groups with younger spouses affected by 9/11. A men's group was also started. Because traditionally men are wary of seeking formal counseling, the group was introduced as an informal support group. This group began to address issues of isolation that men were reporting, and has been helpful in meeting specific needs.

Support for first responders continues to be an increasing area of need. ATSG providers have worked diligently to develop and improve relationships and collaborations with the first responder community. ATSG providers have learned that due to the nature of the first responder culture, this population, as a group, is hesitant to trust those outside of the first responder "family". Concerns about losing one's credibility with colleagues, as well as concerns of losing one's job, are paramount in the minds of first responders when considering whether or not to seek help for mental health concerns. Instead of seeking counseling, many first responders are utilizing maladaptive coping mechanisms such as substance abuse. For many first responders, symptoms of Post-Traumatic Stress Disorder (PTSD) are just beginning to surface, and are having an adverse effect on their work and personal lives.

In December 2002, with the help of MOVA, 25 ATSG providers met with personnel from the On-Site Academy at the fire station in Wilmington, Massachusetts. This opportunity fostered relationships with the Professional Firefighters Association of Massachusetts (PFFM), and aided clinicians in identifying strategies to serve first responders impacted by the September 11<sup>th</sup> tragedy. Collaborative efforts between ATSG providers and the first responder

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community have grown, although this population continues to be one that is challenging to reach.

As a result of the aforementioned collaboration, programs have recently formed working relationships with police and fire departments. Many programs are just beginning to work with this population. One such ATSG provider has begun the challenging process of reaching out to the families of first responders. This outreach has proven to be even more difficult than reaching out to first responders themselves. Making families aware of the services often depends on first responders informing their families that such services exist. Often times, they are hesitant or resistant to sharing this information because they do not want to acknowledge problems or concerns related to their profession. Despite this challenge, one program is working with the PFFM to provide workshops to families of firefighters who responded to 9/11.

Through outreach made after seeing a media report on the company, one ATSG funded agency developed a relationship with a construction company that aided in the rescue/recovery mission at Ground Zero. The responders were typically ironworkers and crane operators. Support groups and individualized services have been provided to this company. Before outreach was initiated by the funded agency, the company employees had not received any services to address their experiences, not even a debriefing.

Many ATSG providers are assisting clients in preparing for the upcoming Zacarias Moussaoui trial. This trial is currently scheduled for October 2003, and will be shown on closed circuit television in a location to be determined. Applications from 9/11 families are due to the U.S. Attorney's Office by the end of June 2003. Reportedly, the number of applications has steadily increased as this deadline comes to a close. The U.S. Attorney's Office has 228 Massachusetts families in their Victim Notification database, and a total of 481 New England families, encompassing Massachusetts, Vermont, Connecticut, New Hampshire, and Rhode Island. Although an official number has not been provided, most families have registered to view the trial. Throughout this application process ATSG providers have noted both the interest and anxiety of these families around this upcoming trial. ATSG providers have advocated for making Massachusetts a site for the closed circuit viewing. In the event that this is not possible, secondary plans are being made to transport Massachusetts 9/11 family members to Washington, D.C., or another potential location, to view the trial, and to provide the necessary ongoing support and advocacy.

Regarding future funding needs, agencies working with individuals, families, and first responders report that ongoing counseling services are important to assist clients in the long term grieving process in the aftermath of the homicide of a loved one. The grieving process is a variable one, and can last for many, many

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years. MOVA has funded 11 of the 13 agencies again for fiscal year 2004 to continue to provide services. Additionally, homicide bereavement services are also accessible through the VOCA grant.

**C. Describe briefly the effectiveness of your strategy for providing statewide counseling services, including victim satisfaction with the services rendered and other lessons learned.**

The process for providing statewide counseling services for victims, first responders, and family members of the September 11<sup>th</sup> tragedy has evolved to an effective systemic approach to meeting the needs of this population. Since this grant began in mid-May of 2002, there has been a significant amount of planning, coordinating, negotiating, and collaborating among state, community-based, and private agencies. Now, over a year later, there is a well-defined comprehensive approach to meeting the needs of victims.

The establishment of regional coordinators throughout the Commonwealth positively impacted the distribution of and timely response to referrals by funded agencies. Through networking and collaborative efforts, providers were able to address meeting specific needs of clients, and reduce the potential for duplication of services. Joining efforts with other stakeholders also aided in recognizing the needs of victims. For example, many providers attend the Board meetings of the Mass911 Fund which has created positive relationships with many impacted families in Massachusetts. Their attendance is a venue for meeting potentially new clients and doing outreach to inform families of their services. Networking with the On-Site Academy has led to relationship development among providers and first responders in police and fire departments.

The "September 11<sup>th</sup> Support Services" Resource Guide of available funded services was recently updated and distributed to families via the Mass911 Fund newsletter. It is also posted on MOVA's website. The ATSG listserv continues to be an effective method for communicating with stakeholders regarding new services, current events, and other news and resources that may prove valuable to those serving this particular population.

There have been many lessons learned from this tragic event. From a broad perspective, it was imperative that public and private agencies invested in serving victims of crime, trauma victims, and citizens of the Commonwealth work together to find a way to meet the needs of the people with as little bureaucracy as possible.

Some families did report that by the time services became available (in May, 2002), they had already established support systems. As time passed, some of

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these families did choose to take advantage of existing services as they felt they needed them. Many needs beyond counseling services were also requested. As appropriate, providers did their best to meet specific needs or to make referrals for things such as financial, legal, and victim advocacy.

While the process to address statewide services has at times been arduous, the outcome has been successful. Those individuals, families, and first responders who have used available services have expressed much appreciation. The following statements are taken from feedback given to providers regarding their experiences:

- *After my husband died on September 11, 2001, my daughter asked me why she was the only one whose Dad died. I knew I needed to get my family into a support group to see other kids in the same position. Her school referred me to [program]. At first I was hesitant to make the commute and effort, but when my daughter went to the Center, she was so excited, jumping up and down and smiling. It wasn't a hassle, and there is so much benefit.*
- *I received your mail with the 911 Fund health care funding information. I sent it to my daughter this morning. Many thanks for your assistance on this. I really appreciate your follow up.*

In a support group evaluation, the following feedback was given:

By being a member of this support group, it has:

- *Helped me to realize that I am "normal" in my grief, that I am not going crazy.*
- *Given me a chance to be with people who are going through the same thing I am and who understand. The people who we are in contact with in our every day life don't seem to understand.*
- *Given me a place to talk about my feelings and those of others with the same level of pain and suffering-it has really helped me move forward.*

Are your needs much different now than when you started the group?:

- *I'm still trying to figure out my own needs. I feel it's so necessary for me to attend, so my needs are being met.*
- *I continue to need the support and guidance that the group offers me. I am starting to look to my future, realizing that I am stuck here and not going anywhere, and trying to figure out what is in my future-what are my wants and needs-which at once were so clear and now an impossibility.*

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In conclusion, this has been a difficult process for everyone involved, most significantly for those who lost a loved one or who were present at Ground Zero, the Pentagon, and the Pennsylvania field. Through the efforts of those providing services, and those in the position to ensure services are available, many people in need have received valuable resources that have helped them cope with their grief, depression, and trauma. Without such services, the process of dealing with loss and healing from the tragedy would undoubtedly be a much more difficult hurdle to overcome.

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**Authorized Signature**

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**Date**